

North Carolina Department of Health and Human Services Division of Mental Health, Developmental Disabilities and Substance Abuse Services

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Michael F. Easley, Governor Carmen Hooker Odom, Secretary

Richard J. Visingardi, Ph.D., Director

May 15, 2002

MEMORANDUM

TO: Area Directors

FROM: Richard J. Visingardi, Ph.D.

RE: COA Accreditation of Area Programs

Accreditation of Area Programs and the successor Local Management Entities (LMEs) is among myriad matters to be addressed in the context of the State Plan. The Plan's 5-year transitional period generates a number of questions regarding accreditation in general and the association with the system's current national accreditor, the Council on Accreditation (COA), in particular. The State Plan's local business plan requirements now specify that an LME must satisfy the principle of meeting "national accreditation or equivalent standards." This situation requires consideration and resolution in ways that:

- Preserve and build on the positive individual agency and system-wide service, support and business improvements realized from COA accreditation of the Area Programs;
- Recognize the distinct differences in concept, role and structure between the incipient LMEs and the existing Area Programs; and
- Provide direction for Counties and Area Programs so as to avoid counterproductive activities and expenditures as we jointly move forward with system reform and service improvement.

Current Division policy on national accreditation, as most recently stated in Dr. Arthur Robarge's May 31, 2001 memorandum to Area Directors RE: National Accreditation Program, is to require COA accreditation of Area Programs in satisfaction of the provisions of NCAC T10: 14V Section .0600. The Commission for Mental Health, Developmental Disabilities and Substance Abuse Services endorsed the policy, with requested Division modifications, on September 17, 2001.

Based on the above considerations, staff input and consultation with the NC Council of Community Programs, the following decisions regarding national accreditation have been reached:



- 1. The appropriate State Plan Implementation workgroup will be assigned the task of researching and developing policy and procedural recommendations for the accreditation of LMEs. This responsibility will include a comparative analysis of management, network and/or service standards of qualified national accrediting bodies and/or the development of Division standards for LME accreditation.
- 2. The two Area Programs that have not yet achieved COA accreditation shall continue in their pursuit of that status, with results expected by June 30, 2002.
- 3. The thirty-six Area Programs currently accredited by COA shall be exempt from the requirement for reaccreditation review by COA. This exemption does not release COA-accredited Area Programs from the obligation of continuing to meet COA maintenance of accreditation requirements during the term of their current COA accreditation cycle (4 years).
- 4. Should the above exemption result in an Area Program's loss of COA accreditation before successor accreditation policy and procedures are in effect, and while current rules for Area Program accreditation remain in force, the Division will consider requesting Commission approval to extend Division accreditation for one year as provided by current rule [NCAC T10: 14V Section .0603 (f)]. Any such approval would not constitute continued COA accreditation of the Area Program.

The Division has had preliminary dialogue with COA on this matter. COA is not expecting reaccreditation applications from otherwise eligible Area Programs at this time. Subsequent COA - Division discussions will be held to clarify issues and reach mutual understandings on a range of associated matters.

Please contact Mike Byrne (<u>michael.byrne@ncmail.net</u>) should you have questions or need additional information on this matter.

RJV/mb

cc: DMHDDSAS Executive Staff
Carol Duncan-Clayton
Jennifer Levitz, COA

